Conestoga High School 200 Irish Road Berwyn, PA19312-1260

Enrollment Form

Student							
First	Middle	Middle			Last		
Place of Birth	Type of Vis	Type of Visa					
Address				Telephone			
Street	City	State	Zip				
School Last Attended				Grade			
Stree	:t	City		State	Zip		
Was student enrolled previously i	n the T/E School District? Ye	s No					
In which T/E school was the stud	lent last enrolled?						
Has individual psycho/education	nal testing of the student eve	r been conducte	d?				
Yes No	If "yes," date of testing						
Has the student received special (education services for learnin	ng disabilities or	other han	dicapping condition?	?		
Yes No							
Indicate any other condition whic impairment, social and emotional							
Indicate any other information of	which the school should be	aware:					

Please complete the reverse side.

Father					
Address if different from s					
Place of birth (country) _					
Employer		Business Te			
Mother					
Address if different from s	student's				
Place of birth (country)					
Employer			Business Telephone		
If parents are divorced, to	whom has legal custoo	dy been av	varded?		
Stepparent/Guardian				Re	elationship
Address if different from s	student's				
Employer	Business Telephone				
Brothers/Sisters	Date of Birth	Residing at Home?			College Attending/Attended
		Yes	No	College	
		Yes	No	College	
		Yes	No	College	
		Yes	No	College	
Comments:					
G*	Le . P P P				
Signature of person compl					
Relationship to student			Date _		